Entered 01/18/18 08:55:31 Desc Nounce Case 18-01420 Doc 1 Filed 01/18/18 Page 1 of 63 Document NORTHERN DISTRICT OF ILLINOIS Fill in this information to identify your case: United States Bankruptcy Court for the: JAN 18 2018 District of _____ JEFFREY P. ALLSTEADT, CLERK Case number (If known): ____ Chapter you are filing under: INTAKE 1 Chapter 7 Chapter 11 Chapter 12 ☐ Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/17 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your government-issued picture identification (for example, First name your driver's license or passport). Middle name Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 years Include your married or Middle name maiden names. Last name First name First name Middle name Middle name Last name 3. Only the last 4 digits of xxx - xx - 3 8 6 4 your Social Security number or federal Individual Taxpayer Identification number 9 xx - xx -__ 9 xx - xx -_____ (ITIN)

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Pebtor 1 Shalish Len, Reynolds

First Name Middle Name Last Name

Case number (if known)____

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)
Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	
	Dusiless fixme	Business name
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	8212 S. Justine St.	Number Street
	Chicago IL WOOD State ZIP Code	City State ZIP Coo
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing his district to file for	Check one:	енидентивности постоя выстанов выполнения выстительний выполнения выполнения выполнения выполнения выполнения
ankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		• • • • • • • • • • • • • • • • • • •
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	(See 28 U.S.C. § 1408.)

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7. The chapter of the Bankruptcy Code you	Check for Ba	one. (Fo	r a brief descrip	tion of each, see No	otice Required by	11 U.S.C. § 342(b) for Individuals Filing the appropriate box.
are choosing to file under		napter 7		no, go to the top of	page I and check	the appropriate box.
unuei	′_	· napter 11	i			
	_	· apter 12				•
-		apter 13				
8. How you will pay the fee	yor sul	urself, yo omitting	tor more detail ou may pay wit	is about how you th cash, cashier's on your behalf, yo	may pay. Typica check, or mone	heck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is y pay with a credit card or check
	□ ine Ap,	ed to p	ay the fee in i for Individuals	nstaliments. If y	ou choose this o	ption, sign and attach the ents (Official Form 103A).
	By less	quest the law, a just than 15 the fee	nat my fee be dge may, but i 50% of the offic in installments	waived (You ma is not required to, cial poverty line the	y request this op waive your fee, hat applies to you	ation only if you are filing for Chapter and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.
Have you filed for bankruptcy within the last 8 years?	□ No ÆYes.	District	Northern District o	F III.MG IS When	01 /1 20/C	2 Case number
		District		When		Case number
		District		When	MM / DD / YYYY	
. Are any bankruptcy	∭ No					
cases pending or being filed by a spouse who is	Yes.	Debtor		1		Relationship to you
not filing this case with you, or by a business partner, or by an affiliate?			-	When	MM/DD/YYYY	Case number, if known
***************************************		Debtor _				Relationship to you
					MM / DD / YYYY	Case number, if known
Do you rent your residence?	No.	Go to lin		ed an eviction judgi	ment against you?	
residence?	103.	Tida you				
residence?	(05.		3o to line 12.		mont against you?	

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Debtor	1

		_	
Shatish	Lena	Reynol	ds
Siret Nama	4 42 4 40 - 8 to		

Case number (if known)_____

2. Are you a sole proprieto	r ∭X(_{No}	. Go to Part 4.				
of any full- or part-time business?		s. Name and location of	husiness			
A sole proprietorship is a			Dadirioss			
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any	ſ			
LLC.		Number Street			***************************************	
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.					w	
to this petition.		City			State	ZIP Code
		Check the appropriate	box to desc	tihe vour husin	A00.	
		☐ Health Care Busin				
		☐ Single Asset Real				1
		☐ Stockbroker (as de				,
		☐ Commodity Broker				
		☐ None of the above		·	· (-//	
11 U.S.C. § 101(51D).		the Bankruptcy Code.				r according to the definition in
	🔲 Yes.	I am filing under Chapte Bankruptcy Code.	er 11 and I a	ir a siriali basii	ess debtor acco	ording to the definition in the
· ·	Yes.	- and a project of the control of th				
rt 4: Report if You Own o	Yes.	- and a project of the control of th				
Report if You Own of Oo you own or have any property that poses or is alleged to pose a threat	Yes.	- and a project of the control of th				
Do you own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to public health or safety?	Yes.	Any Hazardous Proj				
Do you own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to public health or safety? Or do you own any property that needs mmediate attention?	Yes.	Any Hazardous Proj	perty or Ar	y Property 1	hat Needs Ir	
Do you own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to public health or safety? Or do you own any property that needs mmediate attention? For example, do you own erishable goods, or livestock that must be fed, or a building	Yes.	Any Hazardous Prop What is the hazard?	perty or Ar	y Property 1	hat Needs Ir	
14: Report if You Own o	Yes. Or Have A No Yes.	Any Hazardous Prop What is the hazard?	perty or Ar	y Property 1	hat Needs Ir	
Do you own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to public health or safety? Or do you own any property that needs mmediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	Yes. Or Have A No Yes.	Any Hazardous Prop What is the hazard? If immediate attention i	s needed, wi	y Property 1	hat Needs Ir	

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Debtor 1

Stratish Leni Reynolds
First Name Middle Name Last Name

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-01420 Doc 1 Filed 01/18/18

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Debtor 1

Shatish	Lenor	ley	nolds
First Name	Middle Name	Kan	Name

Case number (if known)

16. What kind of debts do you have?	16a. Are your debts prima as "incurred by an individ	arily consumer debts? Consumer c ual primarily for a personal, family, or h	debts are defined in 11 U.S.C. § 101(8) ousehold purpose."
•	No. Go to line 16b. Yes. Go to line 17.	<i>-</i>	,,
	16b. Are your debts prima money for a business or it	rily business debts? Business deb nvestment or through the operation of the	ots are debts that you incurred to obtain
	☐ No. Go to line 16c. ☐ Yes. Go to line 17.		The second of th
	16c. State the type of debts yo	u owe that are not consumer debts or b	ousiness debts.
17. Are you filing under Chapter 7?	☐ No. I am not filing under C	hapter 7. Go to line 18.	and the Company of th
Do you estimate that after any exempt property is excluded and	Yes. I am filing under Chapt administrative expense	ter 7. Do you estimate that after any exe es are paid that funds will be available to	empt property is excluded and odistribute to unsecured creditors?
administrative expenses are paid that funds will be available for distribution to unsecured creditors?	MQ No □ Yes		
18. How many creditors do you estimate that you owe?	□ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
estimate your assets to be worth?	\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$500 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
art 7: Sign Below	I have examined this petition, and	f I declare under penalty of perjury that	
	If I have chosen to file under Cha		if all it is a second of the s
	If no attorney represents me and this document, I have obtained an	I did not pay or agree to pay someone valued the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).
		the chapter of title 11, United States Co	
	I understand making a false stater	ment, concealing property, or obtaining in fines up to \$250,000, or imprisonment	MANAGE - 1
	Signature of Debtor 1	rolab ×	
	Executed on O 18 20	Signature Signature Executed	of Debtor 2

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Debtor 1 Shatish Leni First Name Middle Nam	d by nolds Laght Name C	Case number (if known)						······································	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, dec to proceed under Chapter 7, 11, 12, or 13 of title 11, Unit available under each chapter for which the person is eligi the notice required by 11 U.S.C. § 342(b) and, in a case i knowledge after an inquiry that the information in the sche	clare that I have in ed States Code, a ble. I also certify: n which & 707/b)/	formed nd hav that I h	the e ex ave	debt plain delive	or(s) a ed the ered to	about e e relief to the d	eligibili	۰.
	Signature of Attorney for Debtor	Date	ММ	/	DD	/YY	YY	_	
	Printed name Firm name Number Street								•
	City	State	ZIP Co	ode					
	Contact phone	Email address	*********		**************************************	· · · · · · · · · · · · · · · · · · ·		-	
	Bar number	State							

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Debtor 1 Statish Lens Reynolds
First Name Middle Name Last Name Case number

Case number (if known)____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

	Are you aware that filing for bankruptcy is a serious consequences?	s action with long-term financial and legal
	□ No ♀ Yes	
	Are you aware that bankruptcy fraud is a serious cr inaccurate or incomplete, you could be fined or imp No Yes	ime and that if your bankruptcy forms are risoned?
	Did you pay or agree to pay someone who is not ar No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice,	attorney to help you fill out your bankruptcy forms? Declaration, and Signature (Official Form 119).
	By signing here, I acknowledge that I understand the have read and understood this notice, and I am awa attorney may cause me to lose my rights or property	re that filing a bankruptcy case without an
	Signature of Debtor 1	*
	Date Of 18 2018	Signature of Debtor 2 Date MM / DD / YYYY
	Contact phone <u>773 709 1420</u>	Contact phone
	Cell phone 113-709-1420	Cell phone
The state of the s	Email address Shanks 91011 agmail.com	Email address
- milesanicon mentre elemente destrucción primita ser interior de milesanico de la companya del companya de la companya del companya de la companya del la companya de la c		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:	Shatish	Reynolds)	
	Debtor (s)))))	Case No. Chapter

List of Creditors

One Main Po Box 1010 Evansville, In 47706 First Premier Bank 3820 N. Zouise Ave Sign X Falls, SD 57107	Key note Consulting 200 west Campus Baive St 102 Arington Heights, IL 60004 Capital one Bank USANG P.O. BOX 30281 Salt Lake City, 4+84/30
Afri P.O.BOX 3097 Bloomington, IL 61702	Capitel one Bank, USHNA POBOR 3028/ 3914 Cake City, ut 84/30
Midland Funding LLC Ol Credit One Bank NA. 24-2365 NorthBide Drive ste 200 San Diego CA 92108	Zingo Cush illinois P.O. Box 560/ Vernon Hills IZ 6006/
Merchants Credit Gruide 223 W Suckson St st 900 Chicago, IZ 60606	Portfolio Recovery 120 Corporate Blvd ste 100 Norfolk, VA 23502

Case 18-01420 Doc 1 Filed 01/18/18 Entered 01/18/18 08:55:31 Desc Main Document Sharks Page 40 of 63 Keynolds Debtor 1 Illinois collection service IR P.D. Box 1010 Tinley Park, IL60477-9110

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Fill in this i	nformation to ident	ify your case:	
Debtor 1	Shafsh First Name	Leni/ Middle Name	Reynolds Lagt Marne
Debtor 2 (Spouse, if filing	j) First Name	. Middle Name	Last Name
United States	Bankruptcy Court for th	e: Northern District of	Illinois
Case number	(if known)		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

inform	complete and accurate as possible. If two married people are filing together, both are equally responsible for lation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende riginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	supplying correct d schedules after you file
Part '	B Summarize Your Assets	
		Your assets Value of what you own
1. Sch	nedule A/B: Property (Official Form 106A/B)	20
	Copy line 55, Total real estate, from Schedule A/B	s_ <i>O</i>
1b.	Copy line 62, Total personal property, from Schedule A/B	\$
1c. +	Copy line 63, Total of all property on Schedule A/B	\$_ <i>O</i>
Part 2	Summarize Your Liabilities	
		Your liabilities Amount you owe
	edule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
	edule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. (Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
	Your total liabilities	\$
Part 3	Summarize Your Income and Expenses	
	edule I: Your Income (Official Form 106I)	022/
Copy	y your combined monthly income from line 12 of Schedule I	\$ 2006
	edule J: Your Expenses (Official Form 106J)	\$ 2336 \$ 2150
Copy	y your monthly expenses from line 22c of Schedule J	\$ <u>2150</u>

12/15

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Debtor 1 Shatish Leni Reynolds
First Name Middle Name Last Name

Case number (# known)____

F	Part 4: Answer These Questions for Administrative and Statistical Records
6	Are you filing for bankruptcy under Chapters 7, 11, or 13?
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. PLYes
7.	. What kind of debt do you have?
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.
9,	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:
	Total claim From Part 4 on Schedule E/F, copy the following:
	9a. Domestic support obligations (Copy line 6a.)
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)
	9d. Student loans. (Copy line 6f.) \$
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)
٠	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$
	9g. Total. Add lines 9a through 9f.

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Fill in this information to identify your case and	this filing:		
Debtor 1 Shatish Lenit	Reynolds		
Debtor 2 Middle Name	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern Distric	et of Illinois		
Case number			Check if this is an
_			amended filing
Official Form 106A/B			•
Schedule A/B: Prope	rty		12/15
responsible for supplying correct information write your name and case number (if known). A		this form. On the top of a	oth are equally any additional pages,
Part 1: Describe Each Residence, Buildi	ng, Land, or Other Real Estate You Own or H	ave an Interest In	
1.1. Street address, if available, or other description City State ZIP Co	☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Describe the nature clinterest (such as fee the entireties, or a life	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by
County	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this	Check if this is co (see instructions)	mmunity property
	property identification number:		
1.2. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	ims or exemptions. Put I claims on <i>Schedule D</i> :
	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land	\$	\$
City State ZIP Cod	Investment property Timeshare Other	Describe the nature o interest (such as fee s the entireties, or a life	simple, tenancy by
•	Who has an interest in the property? Check one	and a manage of a fire	

County

Debtor 1 and Debtor 2 only

 $oxed{\square}$ At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

Debtor 1 only
Debtor 2 only

Check if this is community property (see instructions)

Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership City ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this Item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Cheverole + Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

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you have attached for Part 2. Write that number here

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

At least one of the debtors and another

instructions)

Check if this is community property (see

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Last Name

Part 3: Describe Your Personal and Household Items

200		Current value of the
D	you own or have any legal or equitable interest in any of the following items?	portion you own?
		Do not deduct secured claims
	the residual of the second supplies the second supplies the second secon	or exemptions.
ь.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
		1
	Yes. Describe	\$
_	Planta de la companya della companya della companya de la companya de la companya della companya	
1.	Electronics Secondary Television (1997)	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	III No	
	Yes. Describe	Enn on
	cell phone	\$ 500.00
R	Collectibles of value	
v.	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
٠	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	Ž No	
	Yes. Describe	\$
		Φ
9.	Equipment for sports and hobbies	
٠,	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
	and kayaks; carpentry tools; musical instruments	
•	⊕ No	•
	Yes. Describe	· C
		Φ
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
. (No	
	Yes. Describe	S
		T
	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	O No	
•	Yes. Describe	\$ (000.00)
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	gold, silver	
,	XI No	
	Yes. Describe	\$
	Non-farm animals	· Path
	Examples: Dogs, cats, birds, horses	
-7	≦ No	
	Yes. Describe	\$
	Any other personal and household Items you did not already list, including any health aids you did not list	- 16 to
J	<u>kano</u>	
	Yes. Give specific	p.Compai
	information	\$}
E 4	Add the dellar value of all of value and the first than the same and t	
13. <i>j</i> f	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached or Part 3. Write that number here	s + + 00 - W
	The state of the s	
		1000.57

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3.128	Santi	e de la	186	ш

Describe Your Financial Assets

Do you own or have any	legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash				
Examples: Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when yo	u file your petition	
D 100				•
☐ Yes			Cash:	\$
17. Deposits of money Examples: Checking, s	avings, or other financial accou	unts; certificates of deposit; shares in credit unio nultiple accounts with the same institution, list ea	ns, brokerage houses,	
□ No	made modelations. If you have if	maple accounts with the state handbort, not ex	1011.	
A Yes		Institution name:		
		01.00		• (>)
•	17.1. Checking account:	Chase		\$ 0.00
	17.2. Checking account:	Chase		\$ 0-00
	17.3. Savings account:	GHealthaire Credit i	lnion	\$ 5.00
	17.4. Savings account:		· · ·	\$
	17.5. Certificates of deposit:			•
	17.6. Other financial account:			\$
•	17.7. Other financial account:			\$
			,	\$
	17.8. Other financial account:		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	\$
*	17.9. Other financial account:	The state of the s		\$
Examples: Bond funds, i		erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
				\$
				\$
•				\$
9. Non-publicly traded st an LLC, partnership, a	ock and interests in incorpor nd joint venture	ated and unincorporated businesses, includ	ing an interest in	
No	Name of entity:		% of ownership:	
Yes. Give specific			0% %	\$
information about them			0% %	\$
			0%%	\$
			***************************************	7

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Shelfsh (and Ref not Color Case number (# known)

First Name Middle Name Last Name)

and the second s	s include personal checks, ca	shiers' checks, p	n-negotiable instru romissory notes, a	nd money orders.			er () comment of the Color
Non-negotiable instru	ments are those you cannot tr	ansfer to someor	ne by signing or del	livering them.			ma War Dong Jagorya S
⊠ No	•						a man in compa
Yes. Give specific information about	Issuer name:			,			i Marinia de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición dela composición de la composición de la composición de la composición dela composició
them						\$	
	**************************************			······································		\$	
						\$	
21. Retirement or pension	n accounts IRA, ERISA, Keogh, 401(k), 4	:03/h) thrift savir	nas accounts or of	her pension or profi	t-sharing nlans		er meletat (best standen so
□ No	11 0 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	.00(b), tiline 30411	ingo accounts, or on	nei pension or pron	Conding plans		2
Yes. List each						1 0012 7	9
account separately	Type of account: Institu	tion name:	٠	1 0 -	•	65.13.1	a
	401(k) or similar plan; Liv	icoln +	-inancia	1 Grouf		s 40000	
	Pension plan:	ncoin f	inancial	Group		s 6503-7	\$ 8
	IRA:					\$	
	Retirement account:					\$	i i
	Keogh:					\$	and the second con-
	Additional account:				·	\$	Notes the control of
	Additional account:					Ψ	
	Auditional account.						
22 Sacurity denocite and	nrenavmente					\$	AND THE CONTRACT OF STREET FAIR
Your share of all unuse	prepayments d deposits you have made so with landlords, prepaid rent,	that you may co	ntinue service or us ectric, gas, water),	se from a company telecommunications	,	\$	este experimental de esta esta esta esta esta esta esta est
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent,	that you may co public utilities (ele name or individua	ectric, gas, water),	se from a company telecommunications	5	\$	AND THE COMMISSION BUTTON IN LINEAR AND COMPACE AND THE COMPACE AND THE PROPERTY OF THE COMPACE AND THE COMPAC
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent,	oublic utilities (ele	ectric, gas, water),	se from a company telecommunications		\$	ANNE COMPANIE DE LA COMPANIE DE LA COMPANIE COMPANIE COMPANIE DE LA COMPANIE DE L
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution	oublic utilities (ele	ectric, gas, water),	se from a company telecommunications		\$\$ \$\$	
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution Electric:	oublic utilities (ele	ectric, gas, water),	se from a company telecommunications		\$\$\$\$\$\$\$	
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas:	oublic utilities (ek	ectric, gas, water),	telecommunications		\$\$ \$\$ \$\$	ADD - CHARLES AND THE STATE OF
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil:	oublic utilities (ek	ectric, gas, water),	telecommunications		\$\$ \$\$ \$\$ \$\$	
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit:	oublic utilities (ek	ectric, gas, water),	telecommunications		\$	
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent:	oublic utilities (ek	ectric, gas, water),	telecommunications		\$	
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone:	oublic utilities (ek	ectric, gas, water),	telecommunications		\$	**EIII) WAN O'THE PROFES
Your share of all unuse Examples: Agreements companies, or others	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water:	oublic utilities (ek	ectric, gas, water),	telecommunications		\$\$ \$\$	**EIII) WAN O'THE PROFES
Your share of all unuse Examples: Agreements companies, or others No Yes	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	name or individua	ectric, gas, water),	telecommunications		\$\$ \$\$	**EIII) WAN O'THE PROFES
Your share of all unuse Examples: Agreements companies, or others No Yes	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture:	name or individua	ectric, gas, water),	telecommunications	3	\$\$ \$\$	**EIII) WAN O'THE PROFES
Your share of all unuse Examples: Agreements companies, or others No Yes	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	name or individua	ectric, gas, water),	telecommunications		\$\$ \$\$	**EIII) WAN O'THE PROFES
Your share of all unuse Examples: Agreements companies, or others No Yes	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	name or individua	ectric, gas, water),	telecommunications		\$\$ \$\$	**EIII) WAN O'THE PROFES
Examples: Agreements companies, or others No Yes	d deposits you have made so with landlords, prepaid rent, Institution Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:	name or individua	ectric, gas, water),	telecommunications		\$\$ \$\$	**EIII) WAN O'THE PROFES

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Shoutsh Lens Reproducts Case number (if known)

and distributed and survival and the statement of the statement described by which the distributed as the statement of the st	an and the state of the state o		
	ccount in a qualified ABLE program, or under a qualified s	tate tuition program.	
26 U.S.C. §§ 530(b)(1), 529A(b), and 5	29(b)(1).		
∞ No			
Yes Institution	on name and description. Separately file the records of any into	erests.11 U.S.C. § 521(c):
	· · · · · · · · · · · · · · · · · · ·		\$
			\$
			\$
	•		•
25. Trusts, equitable or future interests in exercisable for your benefit	property (other than anything listed in line 1), and rights	or powers	
Ø No			
Yes. Give specific			1
information about them			\$

26. Patents, copyrights, trademarks, trad	e secrets, and other intellectual property		
Examples: Internet domain names, web	sites, proceeds from royalties and licensing agreements		
🔁 No			
Yes. Give specific]
information about them			\$
	**************************************		•
27. Licenses, franchises, and other gene			
Examples: Building permits, exclusive lice	censes, cooperative association holdings, liquor licenses, profe	essional licenses	
₽ No	•		
Yes. Give specific			
information about them			\$
			I Our resolution (Indiana), a la company de November (Indiana), de November (Indiana), de November (Indiana), de
Money or property owed to you?			Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
29. Tax refunds owed to you			
□ No			
Yes. Give specific information	Have not of 1 and	I	E (May 10)
about them, including whether	Have not filed as of today.	Federal: \$	5000.00
	Ustyear numbers given	State: \$	600:00
and the tax years	Dust year nampers give c	Local: \$	
		•	
29. Family support			
	y, spousal support, child support, maintenance, divorce settlen	nent property settlemen	t
(B) No	, , , , , , , , , , , , , , , , , , ,	array property account of	
Yes. Give specific information		•	•
Tes. Give specific information		Alimony:	\$
		Maintenance:	\$
		Support	\$
		Divorce settlement:	\$
•	·		¢
		Property settlement:	Ψ
30. Other amounts someone owes you	and a second of the state of the second of t		
Examples: Unpaid wages, disability insur Social Security benefits: unpa	ance payments, disability benefits, sick pay, vacation pay, wo id loans you made to someone else	rkers' compensation,	
i			
No.			
No Yes, Give specific information			
No Yes. Give specific information			: 5600-00

Filed 01/18/18 Entered 01/18/18 08:55:31 Page 20 of 63 Debtor 1 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No ☐ Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value ... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ No Yes. Describe each claim..... 35. Any financial assets you did not already list □ No Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No Yes. Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Yes, Describe...

☐ No

Case 18-01420 Doc 1 Filed 01/18/18 Entered 01/18/18 08:55:31 Desc Main Document Page 21 of 63 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe... 41. Inventory 🖒 Yes. Describe. 42 interests in partnerships or joint ventures □ No Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes, Describe...... 44. Afry business-related property you did not already list Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ Yes.....

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Case number (if known)

48. Grops—either growing or harvested	
4No	 1
Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
₽ No □ Yes	· ·
Tes	\$
50. Farm and fishing supplies, chemicals, and feed	urami.
₩ No	
☐ Yes	
	\$
51. Apy farm- and commercial fishing-related property you did not already list	
Yes, Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached	
for Part 6. Write that number here	\$
	THE STATE OF THE SECOND CONTRACTOR STATE OF THE STATE OF THE SECOND STATE OF THE SECON
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?	
Examples: Season tickets, country club membership	
No Yes, Give specific	\$
information	\$
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	s
on Add the definition of the original control of the control of th	
Part 8: List the Totals of Each Part of this Form	
	10
55. Part 1: Total real estate, line 2	\$
56. Part 2: Total vehicles, line 5	
57. Part 3: Total personal and household items, line 15 \$\frac{1500}{}	
58. Part 4: Total financial assets, line 36 \$	ilitake var
59. Part 5: Total business-related property, line 45	Here was a series of the serie
50. Part 6: Total farm- and fishing-related property, line 52	Medical Relations
51. Part 7: Total other property not listed, line 54 +\$	
52. Total personal property. Add lines 56 through 61	+ \$
sa. Total of all property on Schedule A/B. Add line 55 + line 62	\$10,176

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Fill in this information to iden	tify your case:			<u> </u>
Debtor 1 Shutish	Middle Name	Reynolds Last Name	-	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for	the: Northern District of	Illinois		
Case number(If known)		· ·		☐ Check if this is ar amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part II Identify the Property You Claim as Exempt

N.	enter identify the Property rou Claim	u as Evelibr		
K 1	Which set of exemptions are you claiming?		·	
	You are claiming state and federal nonbard You are claiming federal exemptions. 11 to		U.S.C. § 522(b)(3)	
		g ozz(b)(z)		
2	For any property you list on Schedule A/B t	hat you claim as exem	pt, fill in the information below.	
	Brief description of the property and line on	Current value of the	Amount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B that lists this property	portion you own		
	Brief Monte Carlo	Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief Monte Carlo, description:	\$ \$0	/ □ \$	
	Line from Schedule A/B;			
	Brief Hydnd9 La description:	s 8,447	 \$	
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
	Brief Tax Refund description:	s 4300		ETC-Claim
	Line from Schedule A/B:	5(400	100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of	f more than \$160,375?	A STATE OF THE STA	
	(Subject to adjustment on 4/01/19 and every 3	years after that for cases	filed on or after the date of adjustment.	
	Yes. Did you acquire the property covered in	by the exemption within	1.215 days before you filed this case?	
	□ No			
	☐ Yes			

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Debtor 1

Shatsh Leni Reynolds
First Name Middle Name Last Name

Case number (if known)

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	_	4	•
# in	a III	4 4	~ .
	100		Sec.

Additional Page

Brief description of the property and line	Current value of the	Amount of the exemption you claim	Specific laws that allow exemption
on Schedule A/B that lists this property	copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from	\$	\$ 100% of fair market value, up to	
Schedule A/B: Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ 100% of fair market value, up to	Designation of the second of t
Brief description: Line from	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Schedule A/B: Brief description: Line from Schedule A/B:	\$	\$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to	THE THE PARTY OF T
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$00% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B;	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	· 		
Shalieh 10	a / Para all		
Debtor 1 First Name Middle	Name Jast Name		
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name		
United States Bankruptcy Court for the: Northern	District of Illinois		
Case number(If known)			Check if this is an
			mended filing
Official Form 106D		•	
Schedule D: Creditor	s Who Have Claims Secur	ed by Property	12/15
	If two married people are filing together, both are e y the Additional Page, fill it out, number the entries, se number (if known).		
Do any creditors have claims secured to No. Check this box and submit this for	by your property? m to the court with your other schedules. You have noth	sing else to report on this form	
Yes. Fill in all of the information below		ing eise to report on this form.	
Part 1: List All Secured Claims			
2 I list all secured claims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A Column B	Column C
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Amount of claim Value of coll Do not deduct the that support value of collateral claim	the state of the s
2.1 Healthrage Associates C	(ed + 4n/on Describe the property that secures the claim:	\$ \$	ss
Creditor's Name 91040 S Pulaski Rd	2016 Hyundai	7	
Number Street	L Sonata		
n-111	As of the date you file, the claim is: Check all that apply Contingent	· · · · · · · · · · · · · · · · · · ·	
OGK (ath) IL 60453 City State ZIP Code	Unliquidated Disputed		
Who owes the debt? Check one.	Nature of lien. Check all that apply.		
Debtor 1 only Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 		
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	☐ Judgment flen from a lawsuit☐ Other (including a right to offset)☐		
Check if this claim relates to a	Other (including a right to other)	-	
Date debt was incurred 5/17	Last 4 digits of account number 70 800		
2.2 One Main Financial	Describe the property that secures the claim:	\$\$	\$\$
Creditor's Name	Cheverolet.		
Number Street	Monte Carlo		
, wagestarters	As of the date you file, the claim is: Check all that apply. Ontingent		
Chickgo IL 60643 State ZIP Code	Unliquidated Disputed		
Who owes the debt? Check one.	Nature of lien. Check all that apply.		
Debtor 1 only	An agreement you made (such as mortgage or secured		
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	Judgment lien from a lawsuit		
Check if this claim relates to a community debt	Other (including a right to offset)	- 	
Date debt was incurred 1011	Last 4 digits of account number 0 5 1		MBA I SA A SA A SA A A SA A SA A SA A SA

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Shatish Leni Refinolus Case number (#known)

Part 1: Additional Page After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name Number Street				
City State ZIP Code	- As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$\$	
Number Street	As of the date you file, the claim is: Check all that apply.			
City State ZiP Code Who owes the debt? Check one.	Contingent Unliquidated Disputed			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name Number Street	Describe the property that secures the claim:	S	\$\$	
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			-
Add the dollar value of your entries	in Column A on this page. Write that number here:			the second second
	add the dollar value totals from all pages.			

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Case number (if known)____

Part 2:	List Others to Be Notified for a Debt That You Alre	
agency is tr	ge only if you have others to be notified about your bankruptcy ying to collect from you for a debt you owe to someone else, li ore than one creditor for any of the debts that you listed in Par	for a debt that you already listed in Part 1. For example, if a collection st the creditor in Part 1, and then list the collection agency here. Similarly, if t 1, list the additional creditors here. If you do not have additional persons to
		On which line in Part 1 did you enter the creditor?
Name		Last 4 digits of account number
Number	Street	
City	State ZIP Code	
		On which line in Part 1 did you enter the creditor?

			•		
	Number	Street			······································
	City		State	ZIP Code	
	1	TO SERVICE AND		TII. COME	
	Name				On which line in Part 1 did you enter the creditor?
	Naitle				Last 4 digits of account number
	Number	Street		•	
				- Ma	_
	City	NOTIVE TO ANNOUNCE STORE THE RESERVE OF THE STORE STORE THE STORE STORE STORE THE STORE ST	State	ZIP Code	
]	•			On which line in Part 1 did you enter the creditor?
	Name			NATE AND DESCRIPTION OF THE PROPERTY OF THE PR	Last 4 digits of account number
	Number	Street			-
٠		00000	•		
	-		· · · · · · · · · · · · · · · · · · ·		
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
			:		-
_	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
		**************************************	· · · · · · · · · · · · · · · · · · ·	·	_
	City		State	ZIP Code	-
٦		·		the state of the s	On which line in Part 1 did you enter the creditor?
١	Name	· · · · · · · · · · · · · · · · · · ·			Last 4 digits of account number
					Last 4 aigita of total air latinoti
	Number	Street			- -
					-
	City		State	ZIP Code	-

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•	Document Page 28 of 63	
Fill in this information to identify your case		
Sold	Reynolds	
Debtor 1 JUF) Middle Nan	ne Las Name	
Debtor 2 (Spouse, if filing) First Name Middle Nan	me Last Name	
United States Bankruptcy Court for the: Northern D	District of Illinois	Check if this is an
Case number (if known)	400 FB 94 14 15 FB 17 11 FB 17	amended filing
Official Form 106E/F		
Schedule E/F: Creditor	s Who Have Unsecured Claims	12/15
	e Part 1 for creditors with PRIORITY claims and Part 2 for creditors	
creditors with partially secured claims that ar		operty. If more space is
Carter List All Of Tour PRIORITE Ons	ecureu olams	
Do any creditors have priority unsecured No. Go to Part 2.	claims against you?	
Yes.	If a creditor has more than one priority unsecured claim, list the credito	er e
unsecured claims, fill out the Continuation Pa	st the claims in alphabetical order according to the creditor's name. If younge of Part 1. If more than one creditor holds a particular claim, list the one the instructions for this form in the instruction booklet.) Total claims	other creditors in Part 3.
.1_]	Last 4 digits of account number \$	\$\$
Priority Creditor's Name	When was the debt incurred?	
Number Street	When was the dest incured:	
VIII-VIII-VIII-VIII-VIII-VIII-VIII-VII	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	•
Debtor 1 only	Disputed	
Debtor 2 only	Type of PRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Domestic support obligations	
Check if this claim is for a community de	Taxes and certain other debts you owe the government	
Is the claim subject to offset?	intoxicated	
□ No	Other. Specify	
☐ Yes		
Priority Creditor's Name	Last 4 digits of account number \$	\$\$
Finally Creditor's Marile	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only .	Type of PRIORITY unsecured claim:	
Debtor 2 only	Domestic support obligations	

☐ No ☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

 \square At least one of the debtors and another

☐ Check if this claim is for a community debt

intoxicated

Other, Specify

 $\hfill \Box$ Taxes and certain other debts you owe the government

Claims for death or personal injury while you were

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Debtor 1

0.10/00/	ρ Døgument	Page 29 of 63	
Shatish Cenil	Keynolo)	Case number (if known)	

Pa	TEIR Your PRIORITY Unsecured Claims	s — Continuation Page			
Af	ter listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	U Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Check it this claim is for a community debt	Other. Specify			
	is the claim subject to offset?		•		
	☐ No ☐ Yes				
	Tes		************	Market and the second s	
لــــــ		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
	W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated	*		
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	<u> </u>	Claims for death or personal injury while you were intoxicated			
	☐ Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	□ No				
	Q Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Fronty Cleuro: 5 Name	When was the debt incurred?			
	Number Street	Mien was the dest incurred!			
٠		As of the date you file, the claim is: Check all that apply.			
		Contingent		•	
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	_ Gropotou			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			į
	☐ Check if this claim is for a community debt	intoxicated =		at was made and was made.	
	·	Other. Specify			
	Is the claim subject to offset?				
	☐ Yes				

Doc 1 Filed 01/18/18 Entered 01/18/18 08:55:31 Page 30 of 63 Document Debtor 1 Case number (if known Part 2: **List All of Your NONPRIORITY Unsecured Claims** 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim NOIS Collection Service INC. Last 4 digits of account number $\frac{O}{9}$ $\frac{3}{8}$ $\frac{8}{30}$ $\frac{8}{1010}$ When was the debt incurred? $\frac{9}{29}$ /17 When was the debt incurred? $\frac{9}{29}$ /17 As of the date you file, the claim is: Check all that approximation $\frac{9}{29}$ $\frac{1}{29}$ $\frac{1}{29}$ As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts

Other, Specify_

Contingent
Unliquidated

Disputed

☐ Student loans

Other, Specify

☐ Contingent

Unliquidated

Student loans

Other, Specify

□ Disputed

Last 4 digits of account number When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

Last 4 digits of account number When was the debt incurred?

60197-6492 (As of the date you file, the claim is: Check all that apply.

□ No

☐ Yes

☐ No

Yes

Debtor 1 only
Debtor 2 only

☐ No

☐ Yes

Who incurred the debt? Check one.

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

is the claim subject to offset?

Who incurred the debt? Check one.

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

🗖 Debtor 1 only

Debtor 2 only

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Case number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
17 credit one Bank	Last 4 digits of account number 9223	.670
Noppriority Creditor's Name 10 BOX 9879 Number Street	When was the debt incurred? $8/5/11$	<u> </u>
Lity Negas NV 89193-8872	As of the date you file, the claim is: Check all that apply. Contingent	
Who incurred the debt? Check one. Debtor 1 only	Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset? No Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
18 First Premier Bank	Last 4 digits of account number 1890	
Nonpriority Creditor's Name 3820 N. LOUISE AVE	When was the debt incurred? 7-//-/O	<u>, , , , , , , , , , , , , , , , , , , </u>
SiGUK FULLS 50 57107	As of the date you file, the claim is: Check all that apply.	
City (State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt Is the claim subject to offset?	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
□ No □ Yes		
Zingo CASh Nonpriority Treditor's Name	Last 4 digits of account number 3386	s_7/7
	When was the debt incurred? $\omega/17$	
Vernon Hills IZ 60661	As of the date you file, the claim is: Check all that apply. Contingent	
Who incurred the deht? Charles	☐ Unliquidated ☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	•
■ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
□ Yes		
	and the state of t	

Case number (if known) 11000 Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 4923 \$598.21 When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only □ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that ☐ Check if this claim is for a community debt you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ ☐ No ☐ Yes 5.1 Last 4 digits of account number 6175 s772 When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that Check if this claim is for a community debt you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify_ ☐ No ☐ Yes Last 4 digits of account number 2186 When was the debt incurred? As of the date you file, the claim is: Check all that apply. tilington Heights IZ 60004 ☐ Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that Check if this claim is for a community debt you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify__ ☐ No ☐ Yes

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Debtor 1

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
Mes Chants Credit Gruide Nonpriority Creditor's Name 2 23 W Sackson Blvd Ste 700 Number Street Chickson Blvd Ste 700 State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$ 168
Prosence Chicked Hospital Network Nonpriority Creditor's Name Prosence Chicked Hospital Network Number Street Chicked The Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$ 237.82
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number 2949 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	s/562.9

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List Others to Be Notified About a Debt That You Already Listed

den s		
5.	example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have r	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the s to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
	Agent tone book JR	On which entry in Part 1 or Part 2 did you list the original creditor?
	P.O. BOX 98872	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	City State ZIP Code	Last 4 digits of account number 9233
	First Premier Bark	On which entry in Part 1 or Part 2 did you list the original creditor?
_	3820 N. Louise for INC	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	STORY FULLS SD 57107 City State ZIP Code	Last 4 digits of account number 1810 DR
	Midhand funding LLC	On which entry in Part 1 or Part 2 did you list the original creditor?
	2365 Northside Dr. ve	Line (Check one): Part 1: Creditors with Priority Unsecured Claims
	Ste 300	Part 2: Creditors with Nonpriority Unsecured Claims
	San Dil SU CA 92108 State ZIP Code	Last 4 digits of account number
	Name	On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured
	TAPENA PRANCE AND	Claims
	City State ZIP Code	Last 4 digits of account number
	Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	· · · · · · · · · · · · · · · · · · ·	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
	City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
	Name	• • •
	Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims
	City State ZIP Code	Last 4 digits of account number
	Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
		Part 2: Creditors with Nonpriority Unsecured Claims
	City State ZIP Code	Last 4 digits of account number

Desc Main

Debtor 1

Shatish Geni Reynolds
First Name Middle Name Cast Name

Case number (if known

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

6a.

6b.

Total claim

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

6e. s

Total claim

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- (6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

6f.

6h.

- : 1109.00
- 6g. \$_____
 - . Ø
- 6i. + 17980.37
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Fill in this	information to identify your case:	
D-14	Shutch Long Reynolds	
Debtor	First Name Middle Name Last Name	
Debtor 2	9) First Name Middle Name Last Name	MANAGEMENT OF THE PROPERTY OF
United State	s Bankruptcy Court for the: Northern District of Illinois	
Case numb	F	☐ Check if this is an
(ii kiiowii)		amended filing
		•
Official	Form 106G	
sched	lule G: Executory Contracts and	Unexpired Leases 12/15
information additional p	lete and accurate as possible. If two married people are filing to if more space is needed, copy the additional page, fill it out, nages, write your name and case number (if known). have any executory contracts or unexpired leases? Check this box and file this form with the court with your other sche	umber the entries, and attach it to this page. On the top of any dules. You have nothing else to report on this form.
2. List sej	. Fill in all of the information below even if the contracts or leases ar parately each person or company with whom you have the cont	ract or lease. Then state what each contract or lease is for (for
	 e, rent, vehicle lease, cell phone). See the instructions for this for ed leases. 	m in the instruction booklet for more examples of executory contracts and
unexpii	54 102363.	
Person	or company with whom you have the contract or lease	State what the contract or lease is for
}		
2.1		
Name		-
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Document Page Shatish Lemis Reynolds
First Name Middle Name Last Name

Case number (# known)_____

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	1	Additional P	age if You H	ave More Contrac	cts or Leases				
	Person	or company v	vith whom you	ı have the contract o	or lease	What the contract or le	ase is for		
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F	II in this i	nformation to iden	itify your case:			
De	ebtor 1	Shatch	Lend	Reynolds		
		First Name	Middle Name	Last Name		
	ebtor 2 pouse, if filing) First Name	Middle Name	Last Name		
Ur	nited States	Bankruptcy Court for	the: Northern District of Illi	nois		
	se number					
(If	known)					Check if this is ar
		_				amended filing
Of	ficial I	Form 106H				
S	ched	ule H: Yo	ur Codebtor	S		12/15
are and	filing toge number t	ether, both are equ	ally responsible for sup oxes on the left. Attach	plying correct information.	Be as complete and accurate as possible. If more space is needed, copy the Additional Pages page. On the top of any Additional Pages	onal Page fill it out
1.	Do you h	ave any codebtors	? (If you are filing a joint	case, do not list either spouse	e as a codebtor)	
	JÉI No	•	()	,	o do a coacoba,	
	Yes					
2.	Within th	ie last 8 years, hav	e you lived in a commu	nity property state or territo exico, Puerto Rico, Texas, W	ory? (Community property states and territor	es include
,		to to line 3.	Juisiana, Nevaua, New IVI	exico, Puerto Rico, Texas, VV	asnington, and wisconsin.)	and the second s
	_		rmer spouse, or legal equ	ivalent live with you at the tim	ne?	***
	□ N		, , , ,			
			nity state or territory did y	ou live?	Fill in the name and current address of the	nat person.
						Alley of the second sec
	N	ame of your spouse, form	er spouse, or legal equivalent		otherwise.	
		,				
	· Ni	umber Street				
	-				_	
	Ci	•	State	ZIP Code		
	shown in Schedule	line 2 again as a d D (Official Form 1	codebtor only if that per	son is a guarantor or cosigi	tor if your spouse is filing with you. List ti ner. Make sure you have listed the credito dule G (Official Form 106G). Use Schedule	or on
	Column	1. Your codebtor			Column 2: The creditor to whom	you owe the debt
					Check all schedules that apply:	
3.1					Пол. н. в. г	
	Name				Schedule D, line	
	Number	Street			Schedule E/F, line	
					Scriedule 6, line	
3.2	City		State	ZIP Code		
3.2	Name	·			Schedule D, line	
	Idalite				☐ Schedule E/F, line	
	Number	Street	MANAGEMENT OF THE PROPERTY OF		Schedule G, line	
	City	**************************************	State	ZIP Code		
3.3			***************************************	·		
	Name				Schedule D, line	***************************************
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	City		State	ZIP Code	· · · · · · · · · · · · · · · · · · ·	

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Debtor 1

Shati	sh lev	W Rey	noids
First Name	Middle Name	Last Name	

Case number (if known)

	Α	dditional Page to Lis	t More Codebtors		·
	Column 1	Your codebtor			Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3			•		
j	Name				Schedule D, line
					Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
3				•	
	Name				Schedule D, line
			· · · · · · · · · · · · · · · · · · ·		☐ Schedule E/F, line Schedule G, line
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_	City		State	ZIP Code	
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	Number	Street		<u> </u>	Schedule G, line
	Number	Gueet			
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	Name				Schedule D, line
					Schedule E/F, line Schedule G, line
	Number	Street			Grieddie G, inte
	City		State	ZIP Code	-
3					
	Name				Schedule D, line
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	Number	Street			Schedule G, line
	City		State	ZIP Code	_
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	Name				Schedule D, line
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	Name		· · · · · · · · · · · · · · · · · · ·		Schedule D, line
				-	☐ Schedule E/F, line
	Number	Street	•		Schedule G, line
	City		State	ZIP Code	-
	Name				Schedule D, line
					Schedule E/F, line
	Number	Street .			Schedule G, line
	City		State	ZIP Code	

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Fill in this information to identify	/yourgase:	et me et me te nete	The state of the s			
Debtor 1 Shutish	Lenir	Reynold	5			
Debtor 2 (Spouse, if filling) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:						
Case number(If known)				Check if this	is:	
				☐ An amen	ded filing	
Official Form 1061				A suppler income a	ment showing po s of the following	stpetition chapter 13 date:
Schedule I: You				MM / DD /	YYYY	
						12/15
Be as complete and accurate as possible supplying correct information. If you are separated and your spot separate sheet to this form. On the Petrick Describe Employm	ou are married and not t use is not filing with you top of any additional p	filing jointly, and y L do not include in	our spouse is li	ving with you,	, include informati	on about your spouse.
Fill in your employment information.		Debtor 1			Debtor 2 or non-	filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ		нь өөлөө жайгай байгай	Employed Not employed	
Include part-time, seasonal, or self-employed work.		0	Cal.	n		
Occupation may include student or homemaker, if it applies.	Occupation	Surgery Presence 2900 1) JCMPC	lu(e,		
	Employer's name	Tresenc	e Healt	ncose_		
	Employer's address	2900 Number Street	V. LAKes	thereigh N	lumber Street	
						11 1700
		Chicayo	TZ 606 State ZIP Co	\$7 c	ity	State ZIP Code
	How long employed the	ere? <u>Myrs</u>	<u>.</u>	_		
िनास्य Give Details About	Monthly Income	,				
Estimate monthly income as of t spouse unless you are separated.						-
If you or your non-filing spouse have below. If you need more space, att	ve more than one employ ach a separate sheet to t	er, combine the info his form,	ormation for all er	mployers for tha	at person on the lin	es
			For D€		or Debtor 2 or ion-filing spouse	
List monthly gross wages, saladeductions). If not paid monthly, of	calculate what the monthly	efore all payroll y wage would be.	2. <u>\$324</u>	18	\$	
3. Estimate and list monthly overti	ime pay.		3. +\$ <u>O</u>	+	\$	months in the
4. Calculate gross income. Add line	e 2 + line 3.		4. \$ <u>324</u>	8	\$	

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Debtor 1

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Pire! Mamo	Michello Manage		······································

Case number (if known)

		For Debtor 1	For Debtor 2 or non-filing spouse	**************************************
Copy line 4 here	→ 4.	\$ <u>3248</u>	\$	
5. List all payroll deductions:		3 Marie 1		
5a. Tax, Medicare, and Social Security deductions	F	s 516.34		
5b. Mandatory contributions for retirement plans	5a. 5b.	\$ <u>) 0.29</u>	\$	
5c. Voluntary contributions for retirement plans	5c.	\$ 0	\$	
5d. Required repayments of retirement fund loans	5d.	· 119.0V	ð	
5e. Insurance	5u. 5e.	\$ 80.48	\$	
5f. Domestic support obligations	5f.	\$ 00.48 \$ (8	\$	
5g. Union dues		\$ 0	δ	
5h. Other deductions. Specify: Heil H flex. 5le	5g.	191 11	5	
	5h.	+\$ 196.14	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	1. 6,	\$ 912.00	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	s 2336	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	sØ	\$	
8b. Interest and dividends	8b.	. Ø	C	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive		Ψ	Ψ	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ <u>Ø</u>	\$	
8d. Unemployment compensation	8d.	\$ <u>Ø</u>	\$	
8e. Social Security	8e.	\$_ <i>\overline{\O}</i>	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		, Ø		
	8f.	\$ <u>~</u>	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income, Specify:	8h. ·	+\$	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
O. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	s 233b +	\$	s <u> </u>
1. State all other regular contributions to the expenses that you list in Scheo	ule J.		<u> </u>	
Include contributions from an unmarried partner, members of your household, y friends or relatives.	our de			
Do not include any amounts already included in lines 2-10 or amounts that are it	not ava	ilable to pay expense	s listed in Schedule J.	l'A
Specify:			11, +	\$
 Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain Si 	result is tatistica	s the combined month al Information, if it app	ily income. iles 12.	\$ 2336 Combined
13. Do you expect an increase or decrease within the year after you file this fo	orm?			monthly income
Yes. Explain:				

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	to the world and the second	the second secon		
Fill in this information to identify	y your case:			
Debtor 1 Shatish	Leni Reyno	(45		
First Name Debtor 2	Middle Name Last Name	Check if this is:		
(Spouse, if filing) First Name	Middle Name Last Name	An amended	~	funtition about a d2
United States Bankruptcy Court for the:	Northern District of Illinois		nt snowing pos s of the followin	tpetition chapter 13 g date:
Case number(If known)		MM / DD / YY	YY	
(ii Alowii)				
Official Form 106J	· .			
Schedule J: Yo	ur Expenses			12/15
	ossible. If two married people are fill led, attach another sheet to this forn I.			
Part 1: Describe Your Ho	usehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
□ No	•			
Yes. Debtor 2 must fil	le Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.		
2. Do you have dependents?	□ No	Dana danila salalianahin ta	D	B 1
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	SOA	Wascaca are of the faire	5/7	□ No ☑ Yes
	Son	TORONAL ORGANIST	16	No VI Yes
	ZXN	OVERSON BOR COPRESSES	2. [1]	☐ No
	<i>)</i> 1100			Yes Yes
				□ No □ Yes
				☐ Yes☐ No
				Yes
Do your expenses include expenses of people other than yourself and your dependents?	12 No ☐ Yes			
	TO THE PROPERTY OF THE PROPERT			
	ng Monthly Expenses			
	bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme			
applicable date.	muptoy to med. It tills is a suppleme	and schedule 3, check the box at the	a rob or ma rom	i and im in the
	-cash government assistance if you		e Januaria eta eta eta eta eta eta eta eta eta et	en e
	it on Schedule I: Your Income (Office	•	Your exper	nses
 The rental or home ownership e any rent for the ground or lot. 	xpenses for your residence. Include	first mortgage payments and 4.	s_1100	00
If not included in line 4:				:
4a. Real estate taxes		4 a.	\$	
4b. Property, homeowner's, or re		4 b.	\$	
4c. Home maintenance, repair, a	, , ,	4c.	\$	
4d. Homeowner's association or	condominium dues	4d.	\$	·

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Debtor 1 Shatish Leni Legnolds Case number (# known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	s 260.00
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	s 270.00
	6d. Other. Specify:	6đ.	\$
7.	Food and housekeeping supplies	7.	\$ 350-00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	s 200-00
10.	Personal care products and services	10.	\$ 100.00
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	: 200 00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	·	
	15a. Life insurance	15a.	, 216.00
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	84188-00
	15d. Other insurance. Specify:	15d,	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17,	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	s 366.00
	17c. Other. Specify:	17c.	\$
	17d. Other, Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18,	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$
٠.	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e	\$ ·

Doc 1 Filed 01/18/18 Entered 01/18/18 08:55:31 Document Page 45 of 63 Debtor 1 Case number (# kn Other. Specify: 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 23. Calculate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. 23b Subtract your monthly expenses from your monthly income. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X Yes. Explain here: Housing will Change.

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Debtor 1 Shame Debtor 2 (Spouse, if filling) First Name United States Bankruptcy Court for the: Case number (If known) Official Form 106J-2	(Ln. Rejn.) Middle Name Last Name Middle Name Last Name	☐ An amender ☐ A suppleme	d filing nt showing pos s of the followin	tpetition chapter 13 g date:
	Expenses for Sepa	rate Household of	Debtor	2 12/15
Use this form for Debtor 2's separ Debtor 2 have one or more depend only with respect to expenses for	ate household expenses ONLY IF Do dents in common, list the dependent Debtor 2 that are not reported on Sc is form. On the top of any additional	ebtor 1 and Debtor 2 maintain separates on both Schedule J and this form. hedule J. Be as complete and accur	ate households. Answer the quarate as possible.	If Debtor 1 and Jestions on this form If more space is
1. Do you and Debtor 1 maintain so	eparate households?			
No. Do not complete this fo Yes	rm.			
2. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	
Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J. Do not state the dependents names.	Yes. Fill out this information for each dependent	Debtor 2:	age	Does dependent live with you? No Yes No Yes No Yes No Yes No Yes No Yes
			MINISTER STATE OF THE STATE OF	☐ No ☐ Yes
Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	□ No □ Yes			: U Tes
Art 21 Estimate Your Ongoi	ng Monthly Expenses			
expenses as of a date after the ban include expenses paid for with non	bankruptcy filing date unless you askruptcy is filed. -cash government assistance if you it on Schedule I: Your Income (Office)	know the value of	n a Chapter 13 c	in the state of th
 The rental or home ownership e any rent for the ground or lot. 	xpenses for your residence. Include	first mortgage payments and 4.	\$	
If not included in line 4:				•
4a. Real estate taxes		4 a.	-	
4b. Property, homeowner's, or re		4b.		***************************************
4c. Home maintenance, repair, a4d. Homeowner's association or	,	40.		
THE PROPERTY OF	condominum dues	4d.	a	

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Debtor 1 Shatsh Len Reynolds
First Name Middle Name Last, Name

Case number (# known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
		٥.	
6.	Utilities:	•	•
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12,	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15,	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$.
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other, Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
• •	4	,,,,,	, T
18,	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	9.	•
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Debtor 1	Shart Sh Lenn Re. First Name Middle Name Last Name	moles	Case number (if known)		·
21. Other. S	pecify:		21.	+\$	annigara anterior anterior de regiones y especialistas
The resu	nthly expenses. Add lines 5 through 21. It is the monthly expenses of Debtor 2. Coenses for Debtor 1 and Debtor 2.		ule J to calculate the 22.	\$	
23. Line not u	sed on this form.				
			·		
24. Do you e	кресt an increase or decrease in your e	xpenses within the year after yo	ou file this form?		
	ole, do you expect to finish paying for your payment to increase or decrease because	-	• •		
☐ No.	-				
☐ Yes.	Explain here:				

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Fill in this in	formation to iden	tify your case:	
Debtor 1	Shatish	Lenic	Reinolds
Debtor 2	First Name	Middle Name	Last Name
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for t	the: Northern District of	Illinois
Case number (If known)	•		The state of the s
(II XIIOWII)			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is I	NOT an attorney to help you fill out bankruptcy forms?
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have that they are true and correct.	read the summary and schedules filed with this declaration and
that they are true and correct.	
· 81 = 1 0 1.00	,
Signature of Debtor 1	Signature of Debtor 2
M 16 2010	Cignotary of pound 2
Date 10 CUIS	Date

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e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case umber (if known). Answer every question. Cive Details About Your Marital Status and Where You Lived Before	Fill in this information to	identify your case:		,		
Deficial Form 107 Check if this is amended filing Check if this parentee Check if this pa	Debtor 1 MAHAN First Name		Reynol	105		
United States Bankruptcy Court for the: Northern District of Illinois Case number (Pricose) Check if this is amended filing Check if this is amended filing Check if t			.,			
Check if this is amended filing Chec	•					
Attement of Financial Affairs for Individuals Filing for Bankruptcy out as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case miles (if known). Answer every question. Sive Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married Not married Not married Not married Debtor 1: Dates Debtor 1 Dates Debtor 2: Inved there Dates Debtor 1 Same as Debtor 1 City State ZiP Code Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Ideho, Louislana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)						Tobash kana is so
Page 2 complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case misber (if known). Answer every question. Statt: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married	n known)		· · · · · · · · · · · · · · · · · · ·			
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During the last 3 years, have you lived anywhere other than where you live now? No	ormation. If more space mber (if known). Answer	is needed, attach a separa every question.	ate sheet to this for	rm. On the top of any add	ditional pages, write your n	ame and case
During the last 3 years, have you lived anywhere other than where you live now? No	What is your current m	arital etatue?				
During the last 3 years, have you lived anywhere other than where you live now? No		ailtaí status í				
No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2: Dates Debtor 2	V	•				
Number Street To Same as Debtor 1 Same as Debtor 1 From	Yes. List all of the pla	aces you lived in the last 3 y	Dates Debtor 1			Dates Debtor 2 lived there
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Same as Debtor 1 Same as Debtor 2 Same as Deb	Number Street	Tracer	To 19/16	Number Street		-
Same as Debtor 1 Same as Debtor 1	Chicaso	TL 60637	•	**************************************	9-910-71-11-11-11-1-1-1-1-1-1-1-1-1-1-1-1-1	
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Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No					,	
states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No			:	City	State ZIP Code	
	City	State ZIP Code			211 0000	
165. Make sure you his out schedule 11. Tout Codebiol's (Ollicial Porm 100H).	Within the last 8 years, states and territories included	did you ever live with a sp	ouse or legal equiv o, Louisiana, Nevad	ralent in a community pro a, New Mexico, Puerto Rid	pperty state or territory? (C	ommunity property Visconsin.)

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3-No ☑ Yes. Fill in the details.	d from all jobs and all busi ome that you receive toge	inesses, including part-ti		ndar years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
All of Physical Conference in the Conference on the Conference of the Annual An	☐ Operating a business ☐ Wages, commissions,	PROPRIES AND ACTION AND ANY CONTROL AND ANY CONTROL AND ANY AREA AND A SECURITY AND ANY CONTROL AND ANY ANY AND ANY ANY ANY ANY AND ANY	Operating a business Wages, commissions.	nda antiis kuu quudha papapa Charphiis dee ay ka da da da an an an an an dha is a an dhin a da dhin a da dhin
For last calendar year: (January 1 to December 31,	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
For the calendar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	
(January 1 to December 31,)	Operating a business	*	Operating a business	Ψ
clude income regardless of whether that income incomernation of the public benefit paym imbling and lottery winnings. If you are filing	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alim ome; interest; dividends; e income that you receive	money collected from lawsu ed together, list it only once t	its; royalties; and
clude income regardless of whether that incomemployment, and other public benefit paymembling and lottery winnings. If you are filing st each source and the gross income from e	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do	of other income are alim ome; interest; dividends; e income that you receive	money collected from lawsu ed together, list it only once t you listed in line 4.	its; royalties; and
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clude income regardless of whether that income mployment, and other public benefit paymembling and lottery winnings. If you are filing at each source and the gross income from et a. No Yes. Fill in the details.	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Do Debtor 1. Sources of income Describe below.	of other income are alimone; interest; dividends; income that you receive to not include income that Gross income from each source (before deductions and exclusions)	money collected from lawsu ed together, list it only once to you listed in line 4. Debtor 2 Sources of income	its; royalties; and under Debtor 1. Gross income from each source (before deductions and
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Case number (if known) List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7: Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other State ZIP Code ☐ Mortgage Creditor's Name Car Car Credit card Number Street Loan repayment Suppliers or vendors Other____ City State ZIP Code ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other___ City ZIP Code State

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hin 1 year before you filed for bankruptcy, did ders include your relatives; any general partners; porations of which you are an officer, director, per nt, including one for a business you operate as a h as child support and alimony.	relatives of any rson in control, o	general partners; r owner of 20% or	partnerships of whi more of their voting	ch you are a general partner; g securitles; and any managing
Yes. List all payments to an insider.				
	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
		\$	\$	
Insider's Name				·
Number Street	-			
City State ZIP Code				

insider's Name	·	\$	\$	
·				
Number Street	***************************************			
				ì
City State ZIP Code in 1 year before you filed for bankruptcy, did y	you make any p	ayments or trans	fer any property o	n account of a debt that benefited
City State ZIP Code in 1 year before you filed for bankruptcy, did y nsider? Ide payments on debts guaranteed or cosigned b No Yes. List all payments that benefited an insider.		ayments or trans Total amount paid	fer any property o Amount you still owe	n account of a debt that benefited Reason for this payment Include creditor's name
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Case number (if known)_

Shatish Lenir Regnolds

		were you a party in any la ses, small claims actions, di			
No					
Yes. Fill in the details	5.	e Tenning seminan seminan penggapan	ing server is the second expension of the second expen	n en en eksek fineskip kiskip je bejes	The state of the s
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ithin 90 days before you filed for bankruptcy, did any counts or refuse to make a payment because you ow No Yes. Fill in the details. Describe the Creditor's Name Number Street	creditor, including a bank yed a debt? ne action the creditor took	or financial institu	tion, set off any am	ounts from your
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Creditor's Name	ne action the creditor took	용 보고 있는 일본다. 전화를 보는 기계 :	Onto pation	and the second of the second
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Number Street			-	
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City State ZIP Code Last 4 digit	s of account number: XXXX-			
hin 1 year before you filed for bankruptcy, was any o	of your property in the pos	session of an assig	nee for the benefit	of
ditors, a court-appointed receiver, a custodian, or ar	nother official?			
No				
Yes				
List Certain Gifts and Contributions				
Gifts with a total value of more than \$600 Describe the	e gifts		Dates you gave	Value
per person			the gifts	tri frantski Vistiga -
				_
Person to Whom You Gave the Gift			***************************************	\$
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				Ψ
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			1	
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City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the per person Person to Whom You Gave the Gift Number Street	gifts		Dates you gave the gifts	Value \$\$
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First Name Middle Name L	key nolds	Case number (# known)	
	· ·		
/ithin 2 years before you filed for bankr	uptcy, did you give any gifts or	contributions with a total value	e of more than \$600 to any charity?
No			
Yes. Fill in the details for each gift or co	ontribution.	ing. Tanàna kaominina dia kaominina mpikambana	ing Professional Programs, and in the Street Advisory from the experience
Gifts or contributions to charities that total more than \$600	Describe what you contributed		Date you Value contributed
Charity's Name			<u> </u>
	_	,	<u> </u>
Number Street			
		THE PROPERTY.	
City State ZIP Code		magazara taman sa sa da sa	
6: List Certain Losses			
No Yes. Fill in the details. Describe the property you lost and	Describe any insurance covera	ge for the loss	Date of your Value of property
No Yes. Fill in the details.		e has paid. List pending insurance	Date of your Value of property lost
No Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance	e has paid. List pending insurance	
No Yes. Fill in the details. Describe the property you lost and	Include the amount that insurance	e has paid. List pending insurance	
No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Include the amount that insurance claims on line 33 of Schedule A/E	e has paid. List pending insurance	
No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Include the amount that insurance claims on line 33 of Schedule A/E	e has paid. List pending insurance i: Property.	loss lost
No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Traitin 1 year before you filed for bankrupt consulted about seeking bankruptcy	Include the amount that insurance claims on line 33 of Schedule A/E	e has paid. List pending insurance i: Property. Ing on your behalf pay or trans ion?	s lost
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		Description and	value of any propert	y transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					e
	Number Street					4
						\$
	City State ZIP Code					
	City State ZiP Gode				A ASSAULT OF THE PROPERTY OF T	
	Email or website address				Name of the state	
	Person Who Made the Payment, if Not You				The state of the s	
	es. Fill in the details.	Description and y	alue of any property	/ transferred		Amount of paym
	Person Who Was Paid				transfer was made	
	Number Street				Annual Company	\$
	3,300					
	City State ZIP Code	toy did you self to	ado or othonylo	transfer one area orbit	to anyone other the	\$
ithi ins clud	City State ZIP Code n 2 years before you filed for bankrup ferred in the ordinary course of your belief both outright transfers and transfers mot include gifts and transfers that you have	ousiness or finance hade as security (su	ial affairs? ch as the granting	of a security interest or	mortgage on your prop	perty).
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ithii	City State ZiP Code In 2 years before you filed for bankrup ferred in the ordinary course of your belie both outright transfers and transfers must include gifts and transfers that you have bes. Fill in the details. Person Who Received Transfer Furniber Street State ZiP Code Terson's relationship to you	pusiness or financi nade as security (su re already listed on t Description and va	ial affairs? ch as the granting this statement.	of a security interest or Describe any propert	mortgage on your prop	perty).

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	ast Name		
N-40		·	
hin 10 years before you filed for bank a beneficiary? (These are often called	ruptcy, did you transfer any prop	erty to a self-settled trust or similar o	levice of which you
- ·	asset-protection devices.)		
No			
Yes. Fill in the details.			•
	Description and value of the pro	perty transferred	Date transf
			was made
Name of trust	e Personale de la companya del companya de la companya del companya de la companya del la companya de la compan		
		·	
Liet Cortain Financial Assess	4. 1	14 -	
List Certain Financial Accoun	its, instruments, Sare Depos	it Boxes, and Storage Units	
No Yes. Fill in the details.			
	Last 4 digits of account number	Type of account or Date account	nt was Last balance be
	and a diffic of appoint lighted:		nt was Last Dalance De
		instrument closed, solo	
		instrument closed, sold or transferre	
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Name of Financial Institution		or transferr	
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or 1	irst Name Middle Name	Last Nan	Thoras		Case	number (if known)_	· , ,			
	stored property in a	storage unit or	place other than y	our home w	ithin 1 year l	before you file	d for banl	kruptcy?		
No Vos Fi	ill in the details.									
163.11	in in the details.		Who else has or had	d access to it?	1.3.3	Describe the co	ontante	Sana ar		Do you et
		-	THIC CISE HUS OF HE	a access to it?	,	Describe die Co	intents .			Do you sti have it?
										п.,
Name	of Storage Facility		Name							□ No □ Yes
										L Tes
Numbi	er Street		Number Street	······································						
									- Lander	
			CityState ZIP Code						İ	
City	State	ZIP Code								
							and a company of the second	Action and the second of the s	r Commence Inc.	degraph and an engine of the artists of
nt 9:	Identify Property	You Hold or	Control for Som	eone Else						
application of the second										
	old or control any pro trust for someone.	operty that som	eone else owns?	include any	property you	u borrowed fro	om, are sto	oring for,		
No No	a dat for someone.									
_	ill in the details.									
		v	Where is the property			Describe the pro-	onartı:		Val	110
		_	······································	•	Į-	Describe die pr	operty		Vai	u o
0	da Maria									
Owner	's Name								\$	
					Ì					
Numbe	ar Street	Nu	mber Street							
Numbe	er Street	Nu	mber Street				-			
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ve you notified any government	tal unit of any release of hazardous material	1?	
No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you k	now it Date of no
Name of site	1 72		***************************************
Natific of Site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP	P Code		
The state of the s	e strong pagantan and the strong strong strong that the strong st	Son operation in monthly in other control control of the second states of the control of the con	reference from the state of the second section of the second second second second second second second second
e you been a party in any judici	ial or administrative proceeding under any o	environmental law? Inclu	de settlements and orders.
No			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of
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And the state of t	Describe the nature of the business Employer Identification number
Business Name	Do not include Social Security number or IT
Dublitos name	EIN:
Number Street	Management of the second secon
	Name of accountant or bookkeeper Dates business existed
City State ZIP Code	From To
	And the second control of the second control
hin 2 years before you filed for bankrup	ptcy, did you give a financial statement to anyone about your business? Include all financial
titutions, creditors, or other parties.	
No	
Yes. Fill in the details below.	$\Lambda = \Lambda \circ \Lambda$
	Date issued
Name	MM / DD / YYYY
•	,
Number Street	
City State ZIP Code	
25 Sign Below	
ave read the answers on this Statement	t of Financial Affairs and any attachments, and I declare under penalty of perjury that the
swers are true and correct. I understand	d that making a false statement, concealing property, or obtaining money or property by frai
U.S.C. §§ 152, 1341, 1519, and 3571.	result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
Δ .	
XI P	who x
Smansh Regre	
Signature of Debtor 1	Signature of Debtor 2
SAT 1-18-2018	Date
	tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
i vou attach additional pages to Your St	
	to the state of th
- No	
•	to build appear (official to the form) to
No Yes	
No Yes	is not an attorney to help you fill out bankruptcy forms?

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Fill in this information to identify your case:	
Debtor 1 Shatish Lenic Reynolds	·
First Name Middle Name Land Name Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number(If known)	☐ C a

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

. For any creditors that you listed in Part 1 of Schedule D: Credinformation below.	ditors Who Have Claims Secured by Property (Officia	Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Healthcare Credit ASSOC. Description of 2016 Hyunda: Sonot 9 property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No Yes
Creditor's Ohe Main Financial Description of property securing debt: Monte Carlo	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No ÆYes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	☐ No ☐ Yes
Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No □ Yes

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Debtor 1

Mutis	Len.	Reynol	ds
First Name	Middle Name	Last Name	

Case number (If known)

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
Description of leased property:	☐ Yes
essor's name:	□ No
Description of leased property:	☐ Yes
essor's name.	□ No
Description of leased roperty:	☐ Yes
essor's name:	□ No
escription of leased roperty:	Yes
essor's name:	□ No
escription of leased roperty:	• Yes
essor's name:	□ No
escription of leased	Yes

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Lessor's name:

property:

Description of leased

Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

* Signature of Debtor 1

Signature of Debtor 2

Date 18 2018

Date _____

□ No □ Yes